Prime Recipient

Reporting Information			
Award Type*	Award Number*	Final Report*	
Grant	U6AHP16591-01	N	

Award Recipient Information			
Recipient DUNS Number*	Recipient Account Number	Recipient Congressional District*	
103989187	S9-08-13-02	01	

Award Information			
Awarding Agency Code*	Award Date*		
7526	09/15/2009		
CFDA Number*			
93.414			
Sub Account Number for Program Source (TAS)			
N/A			
Total Amount of Sub Awards to Individuals*			
\$0.00			
Total Amount of Payments to Vendors less than \$25,000/award*			
\$0.00			
Total Amount of Sub Awards less than \$25,000/award*			
\$0.00			
	Awarding Agency Code* 7526 CFDA Number* 93.414 Sub Account Number for Program Source (TAS) N/A Total Amount of Sub Awards to Individuals* \$0.00 Total Amount of Payments to Vendors less than \$25,000/award* \$0.00 Total Amount of Sub Awards less than \$25,000/award*		

Award Description*

Improve access to primary health care services for underserved and vulnerable populations through recruitment/retention of healthcare professionals in Delaware. This funding will be utilized to develop a healthcare recruitment retention program which will include: 1) developing healthcare recruitment/retention informational materials to present/display at appropriate venues, and 2) offering a conference to educate both healthcare professionals and healthcare entities about the recruitment/retention programs available to them. The following provides an overview of the information that will be included in the informational materials: vacancies at Federally Qualified Health Centers, state agencies, and hospitals; and information on recruitment/retention initiatives such a Conrad State 30/J-1 Visa Waiver Program, the National Health Service Corps Program and the State Loan Repayment Progrem

Number of characters entered: 903

Project Information		
Project Name or Project/Program Title*	Project Status*	Total Federal Amount ARRA Funds Received/Invoiced*
ARRA-STATE PRIMARY CARE OFFICES	Not Started	\$0.00

Number of Jobs*	Description of Jobs Created*		
	Not Started		
0.00 Quarterly Activities/Project Description*	Number of characters entered: 11		
Donarra, Jano IIIII navo adocco lo qualimon, cuntuam, con	awareans. The number of minority students applying to	matriculate in a medical field in an undergraduate	
	althcare recruitment programs will understand the extent from community health centers/safety net providers and		
undrstanding of the cultural competency issues that affe	ect access to care for minority Delawareans. One hundr nd recruitment/retention programs available, including N	ed representatives from health care entities	
Program and the State Loan Repayment Program. One	e hundred percent of health care entities in underserved	areas will understand how to market their	
Repayment Program. Health care professionals and m	bsite which will target the NHSC, the Conrad State 30/J- edical school residents will understand the extent of hea		
Number of characters entered: 1407			
Activity Code (NAICS or NTEE-NPC)*			
1 923120	2		
3	4		
5	6		
7	8		
9	10		
Total Federal Amount of ARRA Expenditure*	Total Federal ARRA Infrastructure Expenditure	Infrastructure Contact Name	
\$0.00	\$0.00	KATHY COLLISON	
Infrastructure Contact Email	Infrastructure Contact Phone	Infrastructure Contact Phone Ext	
Katherine.Collison@STATE.DE.US	302-744-4777	Infractive Contest Street Address 2	
Infrastructure Contact Street Address 1	Infrastructure Contact Street Address 2	Infrastructure Contact Street Address 3	
DIVISION OF PUBLIC HEALTH	DELAWARE OFFICE OF PRIMARY CARE	417 FEDERAL STREET	
Infrastructure City	Infrastructure State	Infrastructure ZIP Code+4	
DOVER	DE	199013635	
	DC		
Infrastructure Purpose and Rationale			
Increase availablility of quality health care to all residents of Delaware through identification of underserved areas followed by recruitment and retention of medical professonals to practice in these areas.			
Number of characters entered: 209			

Primary Place of Performance			
Street Address 1	Street Address 2	City*	

STATE OFFICE OF PRIMARY CARE	417 FEDERAL STREET	DOVER
State*	ZIP Code+4*	Congressional District*
DE	199013635	01
Country*		
US		

Recipient Highly Compensated Officers			
Prime Recipient Indication of Reporting Applicability*	#	Officer Name	Officer Compensation
No	1		
	2		
	3		
	4		
	5		